

ATTACHMENT B.3.

Goals for ICC – Integrated Service and Health Committee Gaps – Barriers – Priorities

GOAL 1: Every child/family involved in Early Start will have access to quality health care services.

OBJECTIVE	STRENGTHEN COLLABORATION ACTIVITIES	INCREASE AWARENESS ACTIVITIES	INCREASE ACCESS TO SERVICES ACTIVITIES
All children with IFSP's will have a primary health care provider.	<p>Work with Medi-cal managed care/health plans and other health care systems.</p> <p>Development of a health care status template (based on best practices) to be linked to each IFSP.</p> <ul style="list-style-type: none"> • Coordinate with agencies/expert to determine best practices <p>Increased and documented contact and communication with each child's MD/PHCP on an on-going basis.</p> <ul style="list-style-type: none"> • Work across systems to identify strategies for effective communication. <p>Standard format and process for obtaining health care status reports and linkages to health care providers to be used by the RC and Education system.</p> <ul style="list-style-type: none"> • Work across systems to 	<p>Establish process and forms for informing MD/PHCP's about Early Start for their patients.</p> <p>Send information regarding eligibility and ES services and invite MD/PHCP participation in IFSP team.</p> <p>Clarification of and standards for roles and responsibilities and qualifications of SC's – across Regional Centers and LEA's.</p>	<p>Identifying and establishing an MD/PHCP for each child /family.</p> <p>Including the name of the MD/PHCP for each child on the IFSP as part of the team.</p> <p>MD will gain better understanding of child's needs and ES services and team.</p> <p>Provide training and on-going support for Early Start Service Coordinators to link children & families to needed health care services.</p> <p>Health care professionals to be identified in ES programs to consult with and be liaison to SC's and PHCP's.</p>

	identify strategies and forms needed for effective communication and documentation		
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GOAL 1 (Continued): Every child/family involved in Early Start will have access to quality health care services.

OBJECTIVE	STRENGTHEN COLLABORATION ACTIVITIES	INCREASE AWARENESS ACTIVITIES	INCREASE ACCESS TO SERVICES ACTIVITIES
IFSP's reflect evidence of coordination and communication across/among agencies and service providers.	<p>ES programs and service providers provide reports and/or information among MD/PCHP's and other members of the child/family team regarding on-going services and progress.</p> <p>Communication developed and documented between providers ie. CCS, Early Start, child care providers, mental health.</p> <p>Evidence of communication includes that PHCP's have been invited to participate in the IFSP and on-going service coordination and delivery.</p>	ES information and information regarding particular children/families is communicated across involved agencies and providers with consent.	<p>Coordination efforts result in improved family-centered and coordinated care – minimize fragmentation and gaps.</p> <p>Provide written communication and make direct contact with PHCP's regarding specific children/families – initial contacts and on-going updates (training by personal contact).</p>

GOAL 2: Every child/family eligible for Early Start is referred.

OBJECTIVE	STRENGTHEN COLLABORATION ACTIVITIES	INCREASE AWARENESS ACTIVITIES	INCREASE ACCESS TO SERVICES ACTIVITIES
Using current baseline data, there will be an increase in the number and overall percentage of children and families identified for referral to and services from Early Start.		Increased outreach to: <ul style="list-style-type: none"> • Underserved populations • PHCP's • Early care and development programs and providers (child care) • Mental health service providers • Early Head Start service providers • Social service providers • Foster care providers • Alcohol/drug prevention program service providers 	